
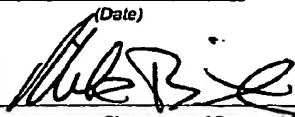


AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 99-032	
Applicant(s): O'Shea et al.					
Application No. 09/535,790	Filing Date March 29, 2000	Examiner John L. Young	Customer No. 22927	Group Art Unit 3622	<div style="position: relative; height: 40px;"> RECEIVE DEC 01 2004 GROUP 361 </div>
Invention: METHOD AND APPARATUS FOR PROVIDING A COUPON OFFER HAVING A VARIABLE VALUE					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	166 -	167 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	60 -	60 =	0 x	\$44.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0271 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Michael D. Downs Attorney for Applicants PTO Registration No. 50,252 (203) 461-7292/phone (203) 461-7300/fax Mdowns@walkerdigital.com CUSTOMER NO. 22927			Dated: November 29, 2004 <div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on November 29, 2004 (Date)  Signature of Person Mailing Correspondence Michael D. Brinton Typed or Printed Name of Person Mailing Correspondence </div>		
CC:					

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	107 minus 20 =	147
INDEPENDENT CLAIMS	60 minus 3 =	57
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	167	Minus	167 = 0
Independent	60	Minus	60 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

12.01.04

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	166	Minus	167 = 1
Independent	60	Minus	60 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	
Independent		Minus	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE	RATE	FEE
	345.00		690.00
X\$ 9=		X\$18=	2676
X39=		X78=	41646
+130=		+260=	
TOTAL		TOTAL	7782

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL		TOTAL	
ADDITIONAL FEE		ADDITIONAL FEE	

RATE

ADDITIONAL FEE

RATE

ADDITIONAL FEE

X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL	-0-	TOTAL	-0-
ADDITIONAL FEE		ADDITIONAL FEE	

RATE

ADDITIONAL FEE

RATE

ADDITIONAL FEE

X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL		TOTAL	
ADDITIONAL FEE		ADDITIONAL FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.